

## **New Jersey Department of Environmental Protection**Site Remediation and Waste Management Program

## TRADITIONAL/DIRECT OVERSIGHT REPORT CERTIFICATION FORM

Date Stamp (For Department use only)

		(i or bepartment use only)			
SECTION A. SITE NAME AND LOCATION					
Site Name: Hess Corporation - Former Port Readi	ng Complex				
List All AKAs: Amerada Hess Corp.; Buckeye Port Reading Terminal					
Street Address: 750 Cliff Road					
Municipality: Port Reading	(Township Borough or City)				
County: Middlesex	Zip Code: 07064				
Program Interest (PI) Number(s): 006148	Case Tracking Numb	ber(s): E20130449			
SECTION B. REPORT INFORMATION					
Report Name: Conceptual Site Model					
Report Date: March 29, 2021					
Case Type:					
□ RCRA GPRA 2020 □ CERCLA/NPL	☐ USDOD ☐ USDOE	☐ Direct Oversight			
Other (explain):					
SECTION C. PERSON RESPONSIBLE FOR CONDUCTING THE REMEDIATION INFORMATION AND CERTIFICATION					
Full Legal Name of the Person Responsible for Conducting the Remediation: Hess Corporation					
- John	Representative Last	Name Schenkewitz			
Title: Senior Advisor, EHS	•				
Phone Number: (609) 406-3969	Ext:	Fax: (732) 352-7795			
Mailing Address: Trenton-Mercer Airport, 601 Stephen Way					
City/Town: West Trenton	State: New Jersey	Zip Code: 08628			
Email Address: jschenkewitz@hess.com					
This certification shall be signed by the person responsible for conducting the remediation who is submitting this notification in accordance with Administrative Requirements for the Remediation of Contaminated Sites rule at N.J.A.C. 7:26C-1.5(a).					
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein, including all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, to the best of my knowledge, I believe that the submitted information is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties.					
Signature: Signature:	D	ate: 3 24 21			
Name/Title: John Schenkewitz, Sr. Advisor EHS					

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SECTION D. LICENSED SITE REMEDIATION PRO	FESSIO	NAL INFORMAT	ION AND	STATEMENT
LSRP ID Number: 576297				
First Name: John	Las	st Name: Virgie	And the second of the second o	
Phone Numbers: (732) 739-6444	Ext.:		Fax: <u>(73</u>	2) 739-0451
Mailing Address: 1625 Highway 71				
Municipality: Belmar	State:	New Jersey	ethni yyyydic <u>u hagailini</u> yyddinianaid yr	Zip Code: <u>07719</u>
Email Address: jvirgie@earthsys.net				
This statement shall be signed by the LSRP who is su N.J.S.A. 58:10B-1.3b(1) and (2).	ubmitting	this notification i	n accordar	nce with N.J.S.A. 58:10C-14, and
(1) I certify, as a Licensed Site Remediation Profession business in New Jersey, that for the remediation submission, I personally: Managed, supervised, of this submission, and all attachments included in the performed by other persons that forms the basis another site remediation professional, licensed or relied; (2) conducted a site visit and observed the as was reasonably observable; and (3)concluded was sufficient information upon which to complete reports related thereto.	described or perform this submar for the int or not, afte of then-cull, in the e	d in this submissined the remediate ission; and/or peformation in this or having: (1) revirent conditions a xercise of my ind	ion, and ai ion condu riodically i submission ewed all a and verified lependent	Il attachments included in this cted at this site that is described in reviewed and evaluated the work or; and/or completed the work of evailable documentation on which I de the status of as much of the work professional judgment, that there
<ul> <li>(2) I certify: <ul> <li>That I have read this submission and all atta</li> <li>That in performing the professional services each area of concern, I adhered to the profe remediation professionals provided in N.J.S.</li> <li>That the remediation conducted at the entire all attachments to this submission, was concrequirements in N.J.S.A. 58:10C-14.c;</li> <li>That the remediation described in this subminusuant to and in compliance with the regulation N.J.A.C. 7:26I; and</li> <li>That the information contained in this subminusumplete.</li> </ul> </li> <li>(3) I certify, when this submission includes a response</li> </ul>	e as the licessional condition.  A. 58:10 as site or enducted publications of lations of lations and l	censed site reme conduct standard C-16; ach area of cond irsuant to and in ad all attachment the Site Remedi	diation pross and requirement, that is compliant to this suffiction Professor	virements governing licensed site s described in this submission and se with the remediation submission, was conducted sessional Licensing Board at shmission is true, accurate, and
(3) I certify, when this submission includes a response been remediated in compliance with all applicable safety and the environment.  (4) I certify that no other person is authorized or able	e statutes	, rules, and regu	lations an	d is protective of public health and
the Board or the Department have provided to me		ny paddirona, om	<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>	outout, or orootromo orginatoro triat
<ul> <li>(5) I certify that I understand and acknowledge that:         <ul> <li>If I knowingly make a false statement, represente the Department I may be subject to civil and 17.a.1(a)through (f) by the Board, including and</li> <li>If I purposely, knowingly, or recklessly make form, record, document or other information the Site Remediation Reform Act, I shall be notwithstanding the provisions of subsection more than \$75,000 per day of violation, or by</li> </ul> </li> </ul>	l administ but not lii a false s submitte guilty, up b. of N y impriso	rative enforcemented to license so tatement, represent to the Departmon conviction, of l.S.2C:43-3, be soment, or both.	ent pursual suspension entation, c ent or requ a crime of ubject to a	nt to N.J.S.A. 58:10C- n, revocation, or denial of renewal; or certification in any application, uired to be maintained pursuant to the third degree and shall, a fine of not less than \$5,000 nor
(6) I certify that I have read this certification prior to si	igning, ce	rtifying, and mak	ing this su	ibmission.
LSRP Signature:		angeneration proper pain and the property of the second control of	Date: 3	8/29/2021
LSRP Name: John Virgie / Senior Client Manager				

Company Name: Earth Systems, Inc.

## Completed forms should be sent to:

Assigned Case Manager
Bureau of Case Management
Site Remediation Program
NJ Department of Environmental Protection
401-05F
PO Box 420
Trenton, NJ 08625-0420